

## COMPLETION CERTIFICATE DATA LOG

This log is required to be submitted to the Michigan Department of State each month the training is provided.

Michigan Department of State - Motorcycle Rider Safety Training Program

Phone: (517) 241-6850 Fax: (517) 373-0964 E-mail: [motorcycling@michigan.gov](mailto:motorcycling@michigan.gov)

RERP # \_\_\_\_\_ Sponsor \_\_\_\_\_ Class Location \_\_\_\_\_

Dates \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_ TYPE: BRC / RRBRC / ARC / 3WBRC \_\_\_\_\_ Course Federally Funded? YES / NO \_\_\_\_\_

RiderCoach \_\_\_\_\_ RiderCoach \_\_\_\_\_

Certificate numbers \_\_\_\_\_ to \_\_\_\_\_ received by \_\_\_\_\_, RiderCoach

Certificates returned \_\_\_\_\_ to \_\_\_\_\_ received by \_\_\_\_\_, Program Manager

	Applicant Name	Date of Birth	Driver License Number	Certificate	Final	Vest
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
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22						
23						
24						
25						
26						
27						
28						
29						
30						

### Final Status Codes

**Pass** – (pass) successful on both tests

**Inc.** - (incomplete) did not complete course

**Fail** – (failed) one or both tests

**NS** – (no show) never showed up

SOS-105 (02/2015) MDOS staff \_\_\_\_\_ Date \_\_\_\_\_

	Pass	Fail	Inc.	NS	Total
<b>Class</b>					
<b>FYTD</b>					